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## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Substitute for form 1449A/PTO

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Examiner Initials *	Cite No 1	Document Number  Number - Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Substitute	for form 1449,	A/PTO			Complete if Known	
				Application Number	10/614268	
INFO	DRMAT	ION DI	SCLOSURE	Filing Date	July 7, 2003	
STA	<b>FEMEN</b>	T BY A	PPLICANT	First Named Inventor	David McFadden	
				Art Unit	3749	
	(Use as n	nany sheets as r	tecessary)	Examiner Name	Cocks, Josiah C.	
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